



175 Sutter Hill Road, Sutter Creek, Ca 95685  
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**DONATION REQUEST**

ORGANIZATION NAME:	NAME & TITLE:
STREET ADDRESS:	EMAIL:
CITY, STATE, ZIP:	PHONE:
Please give a description of your organization:	What is the desired donation? ( IE: Cash, time, equipment, auction item)
EVENT NAME:	DONATION NEEDED BY (DATE):
EVENT DATE:	

Is this a tax-exempt organization?

Yes

NO

501(C) (3) Federal EIN:

***OFFICE USE ONLY***

APPROVED? Y/N	AMOUNT:	DATE:	AUTHORIZED BY:
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